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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/683,883
		Filing Date	October 9, 2003
		First Named Inventor	Lee
		Art Unit	N/A
		Examiner Name	N/A
Total Number of Pages in This Submission	5	Attorney Docket Number	AISC-64729

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input checked="" type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Submission For Filing of Missing Parts Items and Formal Drawings
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	Check
<input type="checkbox"/> Certified Copy of Priority Document(s)		Postcard
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Howard N. Sommers
Signature	<i>Howard N. Sommers</i>
Date	September 24, 2004

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Signature	<i>Howard N. Sommers</i>
Date	9/24/04

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Howard N. Sommers
Howard N. Sommers, Reg. No. 24,138

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of : Chang Hwan Lee
:
Application No. : 10/683,883
:
Filing Date : October 9, 2004
:
For : SAUNA CABIN ASSEMBLY SYSTEM AND METHOD
:
Examiner : N/A
:
Art Unit : N/A
:
Confirmation No. : N/A
:
Docket No.: AISC-64729
Customer No. : 24201
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02 FC:2051 65.00 OP
03 FC:2201 43.00 OP

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Dear Sir:

As set forth in our facsimile of September 13, 2004, copy enclosed, while we have been notified on our return postcard of the filing date and serial number of this application, we have not to date received a Filing Receipt nor a request for Missing Parts,

and have not been able to access information on this application through our office PAIR system. The facsimile requests advice regarding these matters. To date, we have not received a reply to the facsimile.

We are filing herewith the items which would be included in a missing parts submission as follows:

- (1) An executed DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION in compliance with 37 CFR 1.84.
- (2) Our check in the amount of \$493.00 to cover the payment of the surcharge, and small entity filing fee, including additional claims fee.

We are also filing herewith the Formal Drawings.

Please charge any further fees payable in connection with this submission to our Deposit Account No. 06-2425.

Respectfully submitted,

FULWIDER PATTON LEE & UTECHT, LLP

By: Howard N. Sommers
Howard N. Sommers
Registration No. 24,138

Howard Hughes Center
6060 Center Drive, Tenth Floor
Los Angeles, CA 90045
Telephone: (310) 824-5555
Facsimile: (310) 824-9696
Customer No. 24201

66113.1

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O I P E
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P R E V I E WEDAY**FEES TRANSMITTAL
for FY 2004**

Effective 10/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) \$493.00

Complete if Known

Application Number	10/683,883
Filing Date	October 9, 2003
First Named Inventor	Lee
Examiner Name	N/A
Art Unit	N/A
Attorney Docket No.	AISC-64729

METHOD OF PAYMENT (check all that apply)

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FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)	Fee Description	
1051 130	2051 65	Surcharge - late filing fee or oath	65.00
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non - English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 420	2252 210	Extension for reply within second month	
1253 950	2253 475	Extension for reply within third month	
1254 1,480	2254 740	Extension for reply within fourth month	
1255 2,010	2255 1,005	Extension for reply within fifth month	
1401 330	2401 165	Notice of Appeal	
1402 330	2402 165	Filing a brief in support of an appeal	
1403 290	2403 145	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,330	2453 665	Petition to revive - unintentional	
1501 1,330	2501 665	Utility issue fee (or reissue)	
1502 480	2502 240	Design issue fee	
1503 640	2503 320	Plant issue fee	
Total Claims 18 -20** = 0 X = 0.00			
Independent Claims 4 - 3** = 1 X 43.00 = 43.00			
Multiple Dependent			
Fee Description			
Fee Code (\$)	Fee Code (\$)	Fee Description	
1202 18	2202 9	Claims in excess of 20	
1201 86	2201 43	Independent claims in excess of 3	
1203 290	2203 145	Multiple dependent claim, if not paid	
1204 86	2204 43	** Reissue independent claims over original patent	
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (1) (\$)	\$385.00		
Fee from below			
Extra Claims			
Total Claims 18 -20** = 0 X = 0.00			
Independent Claims 4 - 3** = 1 X 43.00 = 43.00			
Multiple Dependent			
Fee Description			
Fee Code (\$)	Fee Code (\$)	Fee Description	
1202 18	2202 9	Claims in excess of 20	
1201 86	2201 43	Independent claims in excess of 3	
1203 290	2203 145	Multiple dependent claim, if not paid	
1204 86	2204 43	** Reissue independent claims over original patent	
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2) (\$)	\$43.00		
Other fee (specify)			
*Reduced by Basic Filing Fee Paid			
SUBTOTAL (3) (\$)	\$65.00		

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SUBMITTED BY**Complete (if applicable)**

Name	Howard N. Sommers	Registration No. (Attorney/Agent)	24,138	Telephone	310-824-5555
Signature	Howard N. Sommers		Date	9/1/04	

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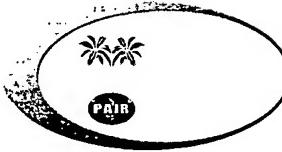
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<small>as1911</small>			
<small>PAGE 1/5 *RCVD AT 9/13/2004 7:06:25 PM [Eastern Daylight Time] *SVR:USPTO-EFXR5-111 *DMS:1729306 *CSID:310 824 9696 *DURATION (min:ss):01:40</small>			



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Client ID/Matter No.: AISC-64729
Date Mailed: October 9, 2003

Date Due:

Applicant/Inventors: Chang Hwan Lee
New Utility Application
EXPRESS MAIL LABEL No.: EV 325 905 062 US

Title: SAUNA CABIN ASSEMBLY SYSTEM AND METHOD

Documents enclosed:

1. Utility Patent Application Transmittal (PTO/SB/05)
2. Specification (4 sheets)
3. Claims (5 sheets)
4. Abstract (1 sheet)
5. Drawings (3 sheets)
6. Request and Certification (Non-Publication Request) (PTO/SB/35)

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original, and a duplicate for fee processing)
2. Applicant claims small entity status.
See 37 CFR 1.27.
3. Specification [Total Pages 10]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. Drawing(s) (35 U.S.C. 113) [Total 3]
 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 18 completed)
 - i. DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
5. Oath or Declaration [Total Pages]
 a. Newly executed (original or copy)
 b. Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 18 completed)
 - i. DELETION OF INVENTOR(S)
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. Application Data Sheet. See 37 CFR 1.76

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP) of prior application No.: _____

Group / Art Unit: _____

Prior application information: Examiner _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

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Name	Howard N. Sommers		
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Name (Print/Type) Howard N. Sommers		Registration No. (Attorney/Agent) 24,138	
Signature <u>Howard N. Sommers</u>		Date 10/09/2003	

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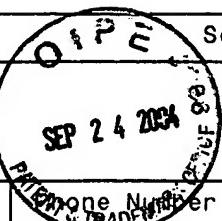
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13 Sep '04 4:01PM Page 1



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